## BOARD OF COUNTY COMMISSIONERS

## AGENDA ITEM SUMMARY

Meeting Date: September 21, 2005	Division: County Attorney
Bulk Item: Yes X No	Department: Administrative Services/RiskManagement
	ccept renewal with VFIS to provide Portable Equipment m of \$54,905 to be paid in four quarterly payments.
coverage for physical damage to scheduled Eme	FP for this carrier on 9/17/2003. This insurance provides ergency vehicles and blanket coverage for lost of ble is \$500. Portable equipment deductible is \$100.
PREVIOUS REVELANT BOCC ACTION: renewal. Premium for 10/1/04, was \$50,157. O	Accepted original proposal 9/17/2003. This is third year ver \$10,000,000 in insured values.
CONTRACT/AGREEMENT CHANGES: To premium. The total increase is \$4,758. The new	This represents a 9.5% increase over the 2004/2005 we renewal dates are 10/1/05-9/30/06.
STAFF RECOMMENDATIONS: Approval.	
TOTAL COST: \$54,905 BUDGE	ΓΕD: Yes <u>X</u> No
COST TO COUNTY: \$54,905 SOURCE	E OF FUNDS: primarily ad valorum
REVENUE PRODUCING: Yes No _X	AMOUNT PER MONTH Year
APPROVED BY: County Atty OMI	B/Purchasing Risk Management
DIVISION DIRECTOR APPROVAL:	JOHN R. COLLINS
DOCUMENTATION: Included X	To Follow Not Required
DISPOSITION:	AGENDA ITEM #

## MONROE COUNTY BOARD OF COUNTY COMMISSIONERS

Effective Date: 10/1/2005 Expiration Date: 9/30/06  Contract Purpose/Description: Portable Equiptment and Emergency Vehicle Physical Damage  Contract Manager: Maria L. Slavik 3178 (Name) (Ext.) (Department/Stop #)  for BOCC meeting on 09-21-2005 Agenda Deadline: 9/6/2005  CONTRACT COSTS  Total Dollar Value of Contract: \$ 54,905 Current Year Portion: \$ Budgeted? Yes No Account Codes: 503-08502-530-450-Grant: \$ County Match: \$		C	CONTRACT SUMMARY		
Expiration Date: 9/30/06  Contract Purpose/Description: Portable Equiptment and Emergency Vehicle Physical Damage  Contract Manager: Maria L. Slavik (Name) (Ext.) (Department/Stop #)  for BOCC meeting on 09-21-2005 Agenda Deadline: 9/6/2005  CONTRACT COSTS  Total Dollar Value of Contract: \$ 54,905 Current Year Portion: \$ Budgeted? Yes No Account Codes: 503-08502-530-450-Grant: \$ County Match: \$	Contract with:	VFIS	Contract #		
Contract Purpose/Description: Portable Equiptment and Emergency Vehicle Physical Damage  Contract Manager: Maria L. Slavik 3178 Administrative Services #7  (Name) (Ext.) (Department/Stop #)  for BOCC meeting on 09-21-2005 Agenda Deadline: 9/6/2005  CONTRACT COSTS  Total Dollar Value of Contract: \$ 54,905 Current Year Portion: \$  Budgeted? Yes No Account Codes: 503-08502-530-450-  Grant: \$  County Match: \$					
Contract Manager: Maria L. Slavik 3178 Administrative Services #7 (Name) (Ext.) (Department/Stop #)  for BOCC meeting on 09-21-2005 Agenda Deadline: 9/6/2005  CONTRACT COSTS  Total Dollar Value of Contract: \$ 54,905 Current Year Portion: \$ Budgeted? Yes No Account Codes: 503-08502-530-450-  Grant: \$			Expiration Date	9/30/06	
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(Name) (Ext.) (Department/Stop #)  for BOCC meeting on 09-21-2005 Agenda Deadline: 9/6/2005  CONTRACT COSTS  Total Dollar Value of Contract: \$ 54,905 Current Year Portion: \$  Budgeted? Yes No Account Codes: 503-08502-530-450-  Grant: \$	Totaloe Equ	punon and Emerge.	ney vemore i nyolear Dan	mg o	
CONTRACT COSTS  Total Dollar Value of Contract: \$ _54,905	Contract Manag	er: Maria L. Slav	ik 3178	Administrative Ser	rvices #7
CONTRACT COSTS  Total Dollar Value of Contract: \$ 54,905		(Name)	(Ext.)	(Department/	Stop #)
Total Dollar Value of Contract: \$	for BOCC meet	ing on 09-21-20	05 Agenda Deadlin	e: 9/6/2005	
Budgeted? Yes No Account Codes: 503-08502-530-450-  Grant: \$ County Match: \$  ADDITIONAL COSTS  Estimated Ongoing Costs: \$ /yr For: (Not included in dollar value above)  CONTRACT REVIEW  Changes Needed Yes No Account Codes: 503-08502-530-450-  CONTRACT REVIEW  Changes Needed Yes No Account Codes: 503-08502-530-450-  CONTRACT REVIEW  Changes Needed Yes No Account Codes: 503-08502-530-450-  (eg. maintenance, utilities, janitorial, salaries, etc.)  Date Out  OM.B./Purchasing Yes No Account Codes: 503-08502-530-450-  CONTRACT REVIEW  Changes Needed Yes No Account Codes: 503-08502-530-450-  CONTRACT REVIEW  Changes Needed Yes No Account Codes: 503-08502-530-450-  CONTRACT REVIEW  Changes Needed Yes No Account Codes: 503-08502-530-450-  County Attorney  Only Account Codes: 503-08502-530-450-  ADDITIONAL COSTS  For: (eg. maintenance, utilities, janitorial, salaries, etc.)			CONTRACT COSTS		
Changes Date In Needed Yes No  Power  No  OM.B./Purchasing  Yes No  Yes No  Yes No  Omage  Yes No  Yes	Budgeted? Yes Grant: \$ County Match: \$ Estimated Ongo	No Acco	ADDITIONAL COSTS	530-450	_
Date In Needed Yes No Periewer Offolos  Risk Management Yes No Period Periewer Offolos  O.M.B./Purchasing Yes No Period Period Offolos  County Attorney 9//05 Yes No Polos Offolos			CONTRACT REVIEW		
O.M.B./Purchasing Yes No Sparations of 1/65  County Attorney 9/1/05 Yes No John Zeells 69/01/6	Division Directo	Date In N	eeded J. S.	eviewer	11
County Attorney 9/1/05 Yes No John Latter 69/01/0	Risk Manageme	nt Yes[	No		
	O.M.B./Purchas	ing Yes[	No Savell	re mulli	9/1/5
Comments:	County Attorney	9/1/05 Yes[	No John 20	ello	09/01/01
	Comments:		,		

OMB Form Revised 2/27/01 MCP #2

LAX VFIS

Date 8/29/05

Number of pages including cover sheet

TO:

Maria Slavik

Monroe County Risk Mgmt

Re: Renewal Premiums

Phone

FROM:

800-995-8554

Joanne Dedrick

VFIS of Florida

One S. Ocean Blvd., #310

Boca Raton, FL 33432

Fax

561-447-9690

Email

jdedrick@vfis.com

Fax

305-295-3179

REMARKS:

☐ Urgent

☐ For your review

☐ Reply ASAP ☐ Please Comment

Maria,

Renewal premiums as follows:

Auto -

\$43,953

Portable Equipment –

\$10,952

Thanks.